



09-24-04

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Docket No. 18075 (AT 20958-2121)  
PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kevin Edward Weidner

Serial No.: 10/654,320

Filed: September 3, 2003

For: COAXIAL CONNECTOR WITH  
TORQUE LIMITING CONTROL

Art Unit: 2839

Examiner: Dinh, Phuong K.

## TRANSMITTAL LETTER

Mail Stop: AMENDMENT  
Hon. Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

1. We enclose the following documents:
  - Amendment Transmittal (3 pages, *in duplicate*)
  - Amendment in Response to Office Action dated August 10, 2004 (10 pgs)
  - Return postcard

## STATUS

## 2. Applicant

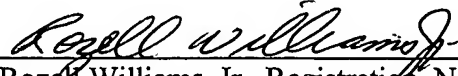
\_\_\_\_\_ claims small entity status.  
\_\_\_\_\_ ☒ is other than a small entity.

## CERTIFICATE OF MAILING/TRANSMISSION

Express Mail No. EV 504791232 US

I hereby certify that this correspondence is, on the date shown below, being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated below in an envelope addressed to: Mail Stop: AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: September 23, 2004

  
Rozell Williams, Jr., Registration No. 44,403  
Armstrong Teasdale LLP  
One Metropolitan Square, Suite 2600  
St. Louis, MO 63102-2740  
314-621-5070

### EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) \_\_\_\_\_ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
_____ first month	\$ 110.00	\$ 55.00
_____ second month	\$ 420.00	\$ 210.00
_____ third month	\$ 950.00	\$ 475.00
_____ fourth month	\$1,480.00	\$ 740.00
_____ fifth month	\$2,010.00	\$ 1,005.00

Fee: \$ \_\_\_\_\_

If an additional extension of time is required, please consider this a petition therefor.

*(Check and complete the next item, if applicable)*

\_\_\_\_\_ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$ \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_.

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

## FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
TOTAL	MINUS		=	x \$9 = \$		x \$18 = \$
INDEP.	MINUS		=	x \$43 = \$		x \$86 = \$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$145 = \$		+ \$290 = \$
				TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

(a) ☒ No additional fee for Claims is required

**OR**

(b) \_\_\_\_\_ Total additional fee for claims required \$

## FEE PAYMENT

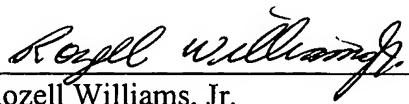
5. \_\_\_\_\_ Attached is a check in the sum of \$\_\_\_\_\_
- \_\_\_\_\_ Charge Deposit Account No. 01-2384 the sum of \$\_\_\_\_\_.
- A duplicate of this transmittal is attached.

## FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

**AND/OR**

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7. \_\_\_\_\_ Other:

  
 Rozell Williams, Jr.  
 Reg. No. 44,403  
 ARMSTRONG TEASDALE LLP  
 One Metropolitan Square, Suite 2600  
 St. Louis, MO 63102  
 314/621-5070



Express Mail No. EV 504791232 US

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TORQUE LIMITING CONTROL	:	

**AMENDMENT**

Mail Stop: AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated August 10, 2004, please amend the above-identified patent application as follows: